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Abstract 754

TITLE: The Pattern of HIV Diagnosis in People with AIDS in Australia, 1991-1998 **AUTHORS:** McDonald A, Li Y, Dore GJ, correll PK and Kaldor JM for the National HIV Surveillance Committee. National Centre in HIV Epidemiology and Clinical Research, the University of New South Wales, Sydney; Australia

OBJECTIVE: To describe the pattern of HIV diagnosis in people with AIDS in Australia.

METHODS: AIDS is a notifiable condition in Australia. Information sought at notification of AIDS includes sex, date of birth, country of birth, date of first HIV and AIDS diagnosis in Australia, exposure category, date of last medical contact and date of death following AIDS. Late presentation was defined as HIV infection newly diagnosed within 3 months of AIDS diagnosis. Survival following AIDS was estimated using the Kaplan-Meier method. Independent factors associated with survival were assessed using a Cox regression model.

RESULTS: By 30 June 1999, 5,433 adults/adolescents diagnosed with AIDS in Australia in 1991 1998 had been notified to the national surveillance centre. AIDS incidence peaked in 1994 with 951 cases, declined to 653 cases in 1996 and dropped to 268 cases in 1998. AIDS was diagnosed within 3 months, 4 months to 5 years, and more than 5 years following HIV diagnosis in 19%, 32% and 43% of cases, respectively; date of HIV diagnosis was not reported for 6%. The proportion of AIDS cases with late HIV presentation remained stable at 17% in 1991-1 996 and increased. to 36% in 1997-1998. Females were more likely than males to present late vs (27 19%, p=0. 0l). AIDS cases with HIV presentation were older than other AIDS cases (mean age 41 vs 37 years, p<0.005). Median survival following AIDS was significantly longer in late presenters (21.3 months) than for cases diagnosed within 5 years (16.8 months) and cases diagnosed more than 5 years following HIV diagnosis (I 7.3 months, p =0.02). In multivariate analysis, improved survival was associated with late presentation, young age, AIDS diagnoses in 1995 or 1996 and cases with CD4 count>50 cells/µL at AIDS diagnosis.

CONCLUSION: In the era of effective treatments, people in Australia continue to be diagnosed late in the course of HIV infection. Improved survival in cases of late HIV diagnosis may be attributable to use of effective antiretroviral therapy.

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